

---

**From:** Dakota Flowers <dakotaf@safechain.com>  
**Sent:** Wed 9/23/2020 6:52:40 PM (UTC)  
**To:** Pat Boyd <PatB@Safechain.com>  
**Cc:** compliance <compliance@Safechain.com>  
**Subject:** FW: Olympia Pharmacy Invoices  
**Attachment:** PED.0132431 9.4.20 Genvoya.pdf



Dakota Flowers | Compliance Support Specialist  
Safe Chain Solutions, LLC  
822 Chesapeake Drive | Cambridge, MD 21613  
office: 855.437.5727 x1022 | fax: 866.930.1128  
[www.SafeChain.com](http://www.SafeChain.com) |

---

**From:** Dakota Flowers  
**Sent:** Wednesday, September 16, 2020 9:04 AM  
**To:** Jonathan Nicholls <JonathanN@Safechain.com>  
**Subject:** RE: Olympia Pharmacy Invoices

And here is the last ones!! Yay!!!!



Dakota Flowers | Compliance Support Specialist  
Safe Chain Solutions, LLC  
822 Chesapeake Drive | Cambridge, MD 21613  
office: 855.437.5727 x1022 | fax: 866.930.1128  
[www.SafeChain.com](http://www.SafeChain.com) |

---

**From:** Jonathan Nicholls <[JonathanN@Safechain.com](mailto:JonathanN@Safechain.com)>  
**Sent:** Tuesday, September 15, 2020 8:46 AM  
**To:** Dakota Flowers <[dakotaf@safechain.com](mailto:dakotaf@safechain.com)>  
**Subject:** Olympia Pharmacy Invoices

Here you go



Jon Nicholls | Senior Account Executive  
Safe Chain Solutions, LLC  
822 Chesapeake Drive | Cambridge, MD 21613  
office: 410.221.3107 | cell: 443.521.7904 | fax: 866.930.1128

GOVERNMENT  
EXHIBIT

162

1:24-cr-20255-WPD

[www.SafeChain.com](http://www.SafeChain.com) | 

# Drug Supply Chain Security Act Document

## (TI) Transaction Information

<b>Drug Name, Strength, Dosage Form, Container Size:</b> <b>GENVOYA TAB 30CT</b>														
<b>NDC:</b> 61958-1901-01 <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 15%;">Lot Number</th> <th style="width: 15%;">Quantity</th> <th style="width: 70%;">Unique Serial #</th> </tr> <tr> <td>19GV022UA</td> <td>1</td> <td></td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </table>			Lot Number	Quantity	Unique Serial #	19GV022UA	1							
Lot Number	Quantity	Unique Serial #												
19GV022UA	1													
<b>Reference Number:</b> <u>01I32431</u> <b>Document Type:</b> <u>INVOICE</u> <b>Reference Date:</b> <u>09/01/2020</u>														

## (TH) Transaction History

Manufacturer's Name: Gilead Sciences, Inc.

Manufacturer's information: 1800 WHEELER AVE LA VERNE, CA 91750

<b>SOLD TO:</b> Name: Independent Pharmacy Cooperative Address: 1550 Columbus Street Sun Prairie, WI 53590  <b>Date Purchased &amp; Ref :</b> 07/23/20 PO#160098	<b>SHIPPED TO:</b> Name: Independent Pharmacy Cooperative Address: 1550 Columbus Street Sun Prairie, WI 53590  <b>Date Received &amp; Ref :</b> 07/23/20
<b>SOLD TO:</b> Name: StainRx Address: 807 Stanley Ave Brooklyn, NY 11207  <b>Date Purchased &amp; Ref :</b> 07/28/20 PO#1SN3490	<b>SHIPPED TO:</b> Name: StainRx Address: 807 Stanley Ave Brooklyn, NY 11207  <b>Date Received &amp; Ref :</b> 07/28/20
<b>SOLD TO:</b> Name: BNR Wholesaler Address: 3858 Nostrand Ave Brooklyn, NY 11235  <b>Date Purchased &amp; Ref :</b> 08/03/20 PO#01A2759	<b>SHIPPED TO:</b> Name: BNR Wholesaler Address: 3858 Nostrand Ave Brooklyn, NY 11235  <b>Date Received &amp; Ref :</b> 08/03/20
<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD STE 11 REGO PARK, NY 11374  <b>Date Purchased &amp; Ref :</b> 08/06/20 PO#01209190	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD STE 11 REGO PARK, NY 11374  <b>Date Received &amp; Ref :</b> 08/06/20
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613  <b>Date Purchased &amp; Ref :</b> 09/01/20 PO#9255	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613  <b>Date Received &amp; Ref :</b> 09/01/20

**(TS) Transaction Statement:** This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

# Drug Supply Chain Security Act Document

## (TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size: <b>GENVOYA TAB 30CT</b>		
NDC: 61958-1901-01		
Lot Number	Quantity	Unique Serial #
19GV022UA	1	

Reference Number: 01I32431  
 Document Type: INVOICE  
 Reference Date: 09/01/2020

## (TH) Transaction History (Cont.)

SOLD TO: <b>Name: OLYMPIA PLAZA PHARMACY INC</b> <b>Address: 5901 W OLYMPIC BLVD STE 103</b> <b>LOS ANGELES CA 90036</b> <b>Date Purchased &amp; Ref : 9/4/20</b>	SHIPPED TO: <b>Name: OLYMPIA PLAZA PHARMACY INC</b> <b>Address: 5901 W OLYMPIC BLVD STE 103</b> <b>LOS ANGELES CA 90036</b> <b>Date Received &amp; Ref : 9/4/20</b>
SOLD TO: <b>Name:</b> <b>Address:</b>  <b>Date Purchased &amp; Ref :</b>	SHIPPED TO: <b>Name:</b> <b>Address:</b>  <b>Date Received &amp; Ref :</b>
SOLD TO: <b>Name:</b> <b>Address:</b>  <b>Date Purchased &amp; Ref :</b>	SHIPPED TO: <b>Name:</b> <b>Address:</b>  <b>Date Received &amp; Ref :</b>
SOLD TO: <b>Name:</b> <b>Address:</b>  <b>Date Purchased &amp; Ref :</b>	SHIPPED TO: <b>Name:</b> <b>Address:</b>  <b>Date Received &amp; Ref :</b>
SOLD TO: <b>Name:</b> <b>Address:</b>  <b>Date Purchased &amp; Ref :</b>	SHIPPED TO: <b>Name:</b> <b>Address:</b>  <b>Date Received &amp; Ref :</b>

## (TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

# Drug Supply Chain Security Act Document

## (TI) Transaction Information

<b>Drug Name, Strength, Dosage Form, Container Size:</b> <b>GENVOYA TAB 30CT</b>														
<b>NDC:</b> 61958-1901-01 <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 15%;">Lot Number</th> <th style="width: 15%;">Quantity</th> <th style="width: 70%;">Unique Serial #</th> </tr> <tr> <td>CCXCVA</td> <td>1</td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </table>			Lot Number	Quantity	Unique Serial #	CCXCVA	1							
Lot Number	Quantity	Unique Serial #												
CCXCVA	1													
<b>Reference Number:</b> <u>01I32431</u> <b>Document Type:</b> <u>INVOICE</u> <b>Reference Date:</b> <u>09/01/2020</u>														

## (TH) Transaction History

Manufacturer's Name: Gilead Sciences, Inc.

Manufacturer's information: 1800 WHEELER AVE LA VERNE, CA 91750

<b>SOLD TO:</b> Name: Independent Pharmacy Cooperative Address: 1550 Columbus Street Sun Prairie, WI 53590  <b>Date Purchased &amp; Ref :</b> 07/17/20 PO#160079	<b>SHIPPED TO:</b> Name: Independent Pharmacy Cooperative Address: 1550 Columbus Street Sun Prairie, WI 53590  <b>Date Received &amp; Ref :</b> 07/17/20
<b>SOLD TO:</b> Name: StainRx Address: 807 Stanley Ave Brooklyn, NY 11207  <b>Date Purchased &amp; Ref :</b> 07/24/20 PO#1SN3485	<b>SHIPPED TO:</b> Name: StainRx Address: 807 Stanley Ave Brooklyn, NY 11207  <b>Date Received &amp; Ref :</b> 07/24/20
<b>SOLD TO:</b> Name: BNR Wholesaler Address: 3858 Nostrand Ave Brooklyn, NY 11235  <b>Date Purchased &amp; Ref :</b> 08/04/20 PO#01A2763	<b>SHIPPED TO:</b> Name: BNR Wholesaler Address: 3858 Nostrand Ave Brooklyn, NY 11235  <b>Date Received &amp; Ref :</b> 08/04/20
<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD STE 11 REGO PARK, NY 11374  <b>Date Purchased &amp; Ref :</b> 08/06/20 PO#01209190	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD STE 11 REGO PARK, NY 11374  <b>Date Received &amp; Ref :</b> 08/06/20
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613  <b>Date Purchased &amp; Ref :</b> 09/01/20 PO#9255	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613  <b>Date Received &amp; Ref :</b> 09/01/20

**(TS) Transaction Statement:** This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

## Drug Supply Chain Security Act Document

### (TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size: <b>GENVOYA TAB 30CT</b>		
NDC: 61958-1901-01		
Lot Number	Quantity	Unique Serial #
CCXCVA	1	

Reference Number: 01I32431  
Document Type: INVOICE  
Reference Date: 09/01/2020

### (TH) Transaction History

SOLD TO: Name: OLYMPIA PLAZA PHARMACY INC Address: 5901 W OLYMPIC BLVD STE 103 LOS ANGELES CA 90036 Date Purchased & Ref : 9/4/20                  01S30114001	SHIPPED TO: Name: OLYMPIA PLAZA PHARMACY INC Address: 5901 W OLYMPIC BLVD STE 103 LOS ANGELES CA 90036 Date Received & Ref : 9/4/20                  01S30114001
SOLD TO: Name: Address:  Date Purchased & Ref :	SHIPPED TO: Name: Address:  Date Received & Ref :
SOLD TO: Name: Address:  Date Purchased & Ref :	SHIPPED TO: Name: Address:  Date Received & Ref :
SOLD TO: Name: Address:  Date Purchased & Ref :	SHIPPED TO: Name: Address:  Date Received & Ref :
SOLD TO: Name: Address:  Date Purchased & Ref :	SHIPPED TO: Name: Address:  Date Received & Ref :

### (TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

# Drug Supply Chain Security Act Document

## (TI) Transaction Information

<b>Drug Name, Strength, Dosage Form, Container Size:</b> <b>GENVOYA TAB 30CT</b>														
<b>NDC:</b> 61958-1901-01 <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">Lot Number</th> <th style="width: 15%;">Quantity</th> <th style="width: 70%;">Unique Serial #</th> </tr> </thead> <tbody> <tr> <td>020717</td> <td>1</td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </tbody> </table>			Lot Number	Quantity	Unique Serial #	020717	1							
Lot Number	Quantity	Unique Serial #												
020717	1													
<b>Reference Number:</b> <u>01I32431</u> <b>Document Type:</b> <u>INVOICE</u> <b>Reference Date:</b> <u>09/01/2020</u>														

## (TH) Transaction History

Manufacturer's Name: Gilead Sciences, Inc.

Manufacturer's information: 1800 WHEELER AVE LA VERNE, CA 91750

<b>SOLD TO:</b> Name: Independent Pharmacy Cooperative Address: 1550 Columbus Street Sun Prairie, WI 53590  <b>Date Purchased &amp; Ref :</b> 07/09/20 PO#160048	<b>SHIPPED TO:</b> Name: Independent Pharmacy Cooperative Address: 1550 Columbus Street Sun Prairie, WI 53590  <b>Date Received &amp; Ref :</b> 07/09/20
<b>SOLD TO:</b> Name: StainRx Address: 807 Stanley Ave Brooklyn, NY 11207  <b>Date Purchased &amp; Ref :</b> 07/29/20 PO#1SN3492	<b>SHIPPED TO:</b> Name: StainRx Address: 807 Stanley Ave Brooklyn, NY 11207  <b>Date Received &amp; Ref :</b> 07/29/20
<b>SOLD TO:</b> Name: BNR Wholesaler Address: 3858 Nostrand Ave Brooklyn, NY 11235  <b>Date Purchased &amp; Ref :</b> 08/03/20 PO#01A2759	<b>SHIPPED TO:</b> Name: BNR Wholesaler Address: 3858 Nostrand Ave Brooklyn, NY 11235  <b>Date Received &amp; Ref :</b> 08/03/20
<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD STE 11 REGO PARK, NY 11374  <b>Date Purchased &amp; Ref :</b> 08/05/20 PO#01209165	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD STE 11 REGO PARK, NY 11374  <b>Date Received &amp; Ref :</b> 08/05/20
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613  <b>Date Purchased &amp; Ref :</b> 09/01/20 PO#9255	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613  <b>Date Received &amp; Ref :</b> 09/01/20

**(TS) Transaction Statement:** This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

## Drug Supply Chain Security Act Document

### (TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size: <b>GENVOYA TAB 30CT</b>			Reference Number: <u>01I32431</u>												
NDC: 61958-1901-01			Document Type: <u>INVOICE</u>												
<table border="1"><tr><th>Lot Number</th><th>Quantity</th><th>Unique Serial #</th></tr><tr><td>020717</td><td>1</td><td></td></tr><tr><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td></tr></table>			Lot Number	Quantity	Unique Serial #	020717	1								Reference Date: <u>09/01/2020</u>
Lot Number	Quantity	Unique Serial #													
020717	1														

### (TH) Transaction History (Cont.)

SOLD TO: Name: OLYMPIA PLAZA PHARMACY INC Address: 5901 W OLYMPIC BLVD STE 103 LOS ANGELES CA 90036 Date Purchased & Ref : 9/4/20 01S30114001	SHIPPED TO: Name: OLYMPIA PLAZA PHARMACY INC Address: 5901 W OLYMPIC BLVD STE 103 LOS ANGELES CA 90036 Date Received & Ref : 9/4/20 01S30114001
SOLD TO: Name: Address:  Date Purchased & Ref :	SHIPPED TO: Name: Address:  Date Received & Ref :
SOLD TO: Name: Address:  Date Purchased & Ref :	SHIPPED TO: Name: Address:  Date Received & Ref :
SOLD TO: Name: Address:  Date Purchased & Ref :	SHIPPED TO: Name: Address:  Date Received & Ref :
SOLD TO: Name: Address:  Date Purchased & Ref :	SHIPPED TO: Name: Address:  Date Received & Ref :

### (TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

# Drug Supply Chain Security Act Document

## (TI) Transaction Information

<b>Drug Name, Strength, Dosage Form, Container Size:</b> <b>GENVOYA TAB 30CT</b>														
<b>NDC:</b> 61958-1901-01 <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 15%;">Lot Number</th> <th style="width: 15%;">Quantity</th> <th style="width: 70%;">Unique Serial #</th> </tr> <tr> <td>19GV020UA</td> <td>1</td> <td></td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </table>			Lot Number	Quantity	Unique Serial #	19GV020UA	1							
Lot Number	Quantity	Unique Serial #												
19GV020UA	1													
<b>Reference Number:</b> <u>01I32431</u> <b>Document Type:</b> <u>INVOICE</u> <b>Reference Date:</b> <u>09/01/2020</u>														

## (TH) Transaction History

Manufacturer's Name: Gilead Sciences, Inc.

Manufacturer's information: 1800 WHEELER AVE LA VERNE, CA 91750

<b>SOLD TO:</b> Name: Independent Pharmacy Cooperative Address: 1550 Columbus Street Sun Prairie, WI 53590  <b>Date Purchased &amp; Ref :</b> 07/10/20 <b>PO#</b> 160052	<b>SHIPPED TO:</b> Name: Independent Pharmacy Cooperative Address: 1550 Columbus Street Sun Prairie, WI 53590  <b>Date Received &amp; Ref :</b> 07/10/20
<b>SOLD TO:</b> Name: StainRx Address: 807 Stanley Ave Brooklyn, NY 11207  <b>Date Purchased &amp; Ref :</b> 07/21/20 <b>PO#</b> 1SN3478	<b>SHIPPED TO:</b> Name: StainRx Address: 807 Stanley Ave Brooklyn, NY 11207  <b>Date Received &amp; Ref :</b> 07/21/20
<b>SOLD TO:</b> Name: BNR Wholesaler Address: 3858 Nostrand Ave Brooklyn, NY 11235  <b>Date Purchased &amp; Ref :</b> 07/30/20 <b>PO#</b> 01A2752	<b>SHIPPED TO:</b> Name: BNR Wholesaler Address: 3858 Nostrand Ave Brooklyn, NY 11235  <b>Date Received &amp; Ref :</b> 07/30/20
<b>SOLD TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD STE 11 REGO PARK, NY 11374  <b>Date Purchased &amp; Ref :</b> 08/04/20 <b>PO#</b> 01209134	<b>SHIPPED TO:</b> Name: BOULEVARD 9229 LLC Address: 9229 QUEENS BLVD STE 11 REGO PARK, NY 11374  <b>Date Received &amp; Ref :</b> 08/04/20
<b>SOLD TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613  <b>Date Purchased &amp; Ref :</b> 09/01/20 <b>PO#</b> 9255	<b>SHIPPED TO:</b> Name: SAFE CHAIN SOLUTIONS, LLC Address: 822 CHESAPEAKE DR CAMBRIDGE MD 21613  <b>Date Received &amp; Ref :</b> 09/01/20

**(TS) Transaction Statement:** This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.

## Drug Supply Chain Security Act Document

### (TI) Transaction Information

Drug Name, Strength, Dosage Form, Container Size: <b>GENVOYA TAB 30CT</b>		
NDC: 61958-1901-01		
Lot Number	Quantity	Unique Serial #
19GV020UA	1	

Reference Number: 01I32431  
Document Type: INVOICE  
Reference Date: 09/01/2020

### (TH) Transaction History (Cont.)

SOLD TO: Name: OLYMPIA PLAZA PHARMACY INC Address: 5901 W OLYMPIC BLVD STE 103 LOS ANGELES CA 90036 Date Purchased & Ref : 9/4/20                  01S30114001	SHIPPED TO: Name: OLYMPIA PLAZA PHARMACY INC Address: 5901 W OLYMPIC BLVD STE 103 LOS ANGELES CA 90036 Date Received & Ref : 9/4/20                  01S30114001
SOLD TO: Name: Address:  Date Purchased & Ref :	SHIPPED TO: Name: Address:  Date Received & Ref :
SOLD TO: Name: Address:  Date Purchased & Ref :	SHIPPED TO: Name: Address:  Date Received & Ref :
SOLD TO: Name: Address:  Date Purchased & Ref :	SHIPPED TO: Name: Address:  Date Received & Ref :
SOLD TO: Name: Address:  Date Purchased & Ref :	SHIPPED TO: Name: Address:  Date Received & Ref :

### (TS) Transaction Statement: This Company complied with each applicable subsection of FDCA Sec. 581 (27) (A) – (G)

- (A) is authorized as required under the Drug Supply Chain Security Act;
- (B) received the product from a person that is authorized as required under the Drug Supply Chain Security Act;
- (C) received transaction information and a transaction statement from the prior owner of the product, as required under section 582;
- (D) did not knowingly ship a suspect or illegitimate product;
- (E) had systems and processes in place to comply with verification requirements under section 582;
- (F) did not knowingly provide false transaction information; and
- (G) did not knowingly alter the transaction history.